Calling The Shots

A publication of the Hawaii Immunization Branch
1250 Punchbowl Street & Honolulu, Hawaii, 96813 & Questions? Comments? (808) 586–8300

Volume 5, Number 1, Spring 2005

FDA Licenses New Vaccine for the Prevention of Meningococcal Disease

By Carl Chu, PharmD

On January 14, 2005, the U.S. Food and Drug Administration (FDA) licensed (MenactraTM) a new meningococcal **conjugate** vaccine (MCV4). The immune responses to MCV4 and the currently licensed meningococcal **polysaccharide** vaccine (MPSV4) were similar, but the additional benefits of the conjugate vaccine include improved duration of protection, induction of immunologic memory, booster responses and reduction in nasopharyngeal bacterial carriage. On February 10, 2005, the U.S. Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) added both MCV4 and MPSV4 to the Vaccines for Children Program (VFC). Providers will be notified when vaccines are available **through the Hawaii VFC Program**.

Meningococcal disease is a rare but serious bacterial infection that strikes approximately 1,400-2,800 people in the U.S. each year. 10-14% of these people die, in spite of treatment with antibiotics. MCV4 and MPSV4 do not protect against serotype B, which causes one-third of meningococcal cases.

References:

Epidemiology and Prevention of Vaccine-Preventable Diseases, 8^{th} Edition, Jan. 2004

U.S. FDA Center for Biologics Evaluation and Research

CDC National Immunization Program

Product Information (1/2003,1/2005) Aventis Pasteur; AHFS Category: 80:12

CDC MMWR Vol.49/No.RR-7:6

ACIP/VFC Resolution No.2/05-2

Key Similarities and Differences Between MCV4 and MPSV4		
	MCV4	MPSV4
Eligible Groups for VFC	>Adolescents 11-18 yrs : 1. Traveling to countries where N.meningitidis is hyperendemic or epidemic 2. With terminal complement deficiencies & those with anatomic or functional asplenia 3. Who are infected with HIV > Adolescents ages 11-12 at their preadolescent assessment visit. > Adolescents at high school entry (age 15) who were not vaccinated at the preadolescent visit. > College freshmen who live in dormitories.	> Children & adolescents 2-18 yrs: 1. Traveling to countries where N.meningitidis is hyperendemic or epidemic 2. With terminal complement deficiencies & those with anatomic or functional asplenia 3. Who are infected with HIV > College freshmen who live in dormitories.
Dosage & Administration	Single injection of 0.5 ml Intramuscularly	Single injection of 0.5 ml Subcutaneously
Booster	Not determined	May be indicated for individuals at high risk

Reminder:

If you should run out of your supply of VAVR forms you may use a photocopy. Please make sure to use the clean, *non-shaded*, camera-ready version that was sent to your office in our last Toolkit update. If you would like to request a clean, non-shaded, camera-ready version of the

VAVR, please contact the Hawaii Vaccines
For Children Program at 586-8300 or
1-800-933-4832.



You're Invited!

The Hawaii Immunization Coalition is extending an invitation to immunization providers to attend a presentation by Raul Rudoy, M.D., Chairman, Department of Pediatrics, University

of Hawaii John A. Burns School of Medicine, on Wednesday, March 30, 2004 from 12 noon – 2:00 p.m. in the HMSA multi-purpose room. The topic — both timely and critical — *Communicable at Any Age – Pertussis and Meningococcus* will arm attendees with needed information about two devastating diseases. Please contact Judy Strait-Jones, Coalition President, at 586-8321 to reserve a space and for details.



TALK TO THE DOC...

By Marcia M. Nagao, MD, MPH

Is the pneumococcal conjugate vaccine (PCV7) shortage over?

Yes. The Centers for Disease Control and Prevention (CDC) announced in September 2004 that production capacity had been increased and that supply was sufficient to resume the routine, 4-dose schedule.

Children who were incompletely vaccinated due to the shortage should receive "catch-up" doses. The highest priority for catch-up vaccination is to ensure that children aged <5 years at high risk for invasive pneumococcal disease (i.e. those with immunocompromising or chronic conditions) are fully vaccinated. Second priorities include vaccination of healthy children aged <24 months who have not received any doses of PCV7 and vaccination of healthy children aged <12 months who have not yet received 3 doses.

For further information, including a vaccination schedule for children who are incompletely vaccinated, see the September 17, 2004 issue of MMWR 53(36): 851-852 or call the Hawaii Immunization Branch at 586-8300.



Vaccines for Children Program

VFC vaccines should only be administered to individuals 18 years & under who are:

- Uninsured
- Enrolled in Medicaid/Ouest
- American Indian or Alaskan Native or
- Underinsured*

*Children who are underinsured are eligible to receive VFC vaccine only at a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC).

Individuals who are enrolled in Medicaid/Quest who are older than 18 years of age are not eligible for VFC vaccines.

Teen Vax Program

This program makes certain vaccines available to children 6 through 18 years of age who are **not** eligible for VFC vaccine.

The four vaccines provided through the Teen Vax Program are MMR (Measles, Mumps, Rubella), Hepatitis B, Td (Tetanus and Diphtheria) and Varicella (chicken pox).

The Vaccine Administration Visit Record (VAVR) lists the VFC and Teen Vax criteria. When completing the VAVRs, please be sure to check off the appropriate categories (either "VFC Eligible" **OR** "Teen Vax").

Please give us a call at the Immunization Branch at 586-8300, or toll free at 1-800-933-4832, if you have any questions.



The Hawaii VFC program would like to extend a warm welcome to our new Pharmacist, Carl Chu, Pharm D. Carl earned his undergraduate degree in biochemistry from the University of California, Davis, and his pharmacy degree at the University of California, San Francisco. He brings to our program a wealth of experience

after many years of working in the private sector. In his spare time he enjoys playing tennis, biking, and spending time with his family.

FEE CAP FOR THE ADMINISTRATION OF FEDERALLY-FUNDED

By Mardelle Bautista, MPH

Providers participating in the VFC program may impose a fee for the administration of a VFC pediatric vaccine, as long as the fee does not exceed \$15.71.

The fee cap of \$15.71 was determined for the State of Hawaii by the Centers for Medicare and Medicaid Services (CMS). Administration fees for all states were published in the Federal Register, which was mandated by law to become operational on October 3, 1994. These maximum charges are based on the actual costs of vaccine administration, as determined by the State.

However, please be aware that providers may not deny vaccine administration to a vaccine-eligible child if the child's parent or legal guardian is unable to pay the administration fee.

*For more information, contact the VFC Program at (808) 586-8300 or toll-free at 1-800-933-4832.

A Reminder About VFC Eligiblity

By Sharon F. Dellinger, RN





You may have already had the pleasure of meeting our new Epidemiological Specialist, Mardelle Bautista, MPH, during your recent 2004 VFC/AFIX site visit. Mardelle earned her undergraduate degree in Community Health Education from Mt. St. Vincent College and Master's in Public Health from Drexel

University. In addition to the attention she gives to determining provider immunization rates, Mardelle also enjoys running, yoga, hiking and planning her upcoming wedding.